SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

500000 800000 8

Faville O. Zonig Den

212013

Refund: **Amount Paid:** 1528-13 13:0386 10-3-13

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

TYPE OF PERMIT REQUESTED.	5 (2.00)	X LAND USE SANITA	IVY	CONDITIONAL USE		SPECIAL USE	□ B.O.A. □	OTHER
Owner Stranie.		Y	Walling Address:	city/	CITY/State/Zip:		\ lelep	Loch, sall sill
Address of Property: 25100	MARY DIAM	ĈĄ.	city/state/zip:	5.975 J	6		Cell P	Cell Phone:
Contractor:	self	م ئہ		Plumber:			Plumi	Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Signing Application on			gent Mailing Ad	Agent Mailing Address (include City/State/Zip):	State/Zip):	Written A Attached	Written Authorization Attached O Yes O No
PROJECT Leg	Legal Description: ((Use Tax Statement) PIN 04-	PIN: (23 digits) 04- 076-7-46	1	2-7-2000	Recorded D	ocument: (i.e. P	맺으!
50V1/4, NW	1/4	Gav't Lot Lot(s)	CSM Vol & Page	Lot(s) No.		Subdivision:		
Section 22	, Township H	N, Range 5 W	Town of:		TWANTER OF THE PROPERTY OF THE	Lot Size	Acrea	Acreage
0	s Property/Land v eek or Landward s	☐ Is Property/Land within 300 feet of River, Since Creek or Landward side of Floodplain?	Stream (incl. Intermittent) If yescontinue	Distance Structure	cture is from Shoreline :	*	Is Property in	Are Wetlands
☐ Shoreland ————————————————————————————————————	s Property/Land w	Lake,	Pond or Flowage If yescontinue —	Distance Structure	cture is from Shoreline :	¥	☐ Yes	
Non-Shoreland								and the second
Value at Time of Completion * include donated time & (Wh.	Project (What are you applying for)	# of Stories and/or basement	Use	# of bedrooms	Sew	What Type of Sewer/Sanitary System Is on the property?	Type of itary System property?	Water
Z Z	New Construction	1 K 1-Story	反 Seasonal	□ 1	☐ Municipal/City	City		Citv
¢ □ A	Addition/Alteration	ă E	1		1		Type:	<u> </u>
7 0 C	Conversion		La Carlo	3		(s	Specify Type: www.d	
	Run a Business on	B		⊠ Uone	Portable (w/service con	or Vault	ce contract)	allon)
Pr	Property	☐ Foundation			☐ Compost Toilet☐ None	ilet		
Existing Structure: (if permit being applied for is relevant to it)	permit being applie	d for is relevant to it)	Length: 50		Width: 30		Height:	16
Proposed Construction:	1:				Width:		Height:	
Proposed Use	·	e de la companya de l	Proposed Structure	8		Dim	Dimensions	Square Footage
	Princi	Principal Structure (first structure on property) Residence (i.e. cakin, bunting shock atc.)	a chack atc.)) (×	
		with Loft	B Jilack, etc.)			~	× ×	
Residential Use		with a Porch			and the state of t		××	The state of the s
		with a Deck					× ×	A Company of the Comp
		with (2 nd) Deck					×)	
Commercial Use		with Attached Garage	arage		THE PROPERTY OF THE PROPERTY O			
	□ Mobil	Mobile Home (manufactured date)	date)duarters, c	T COOKIIB &	COOKING & Tood prep lacinties;	. s)	× ×	
Municipal IIco	□ Addit	Addition/Alteration (specify)	lı l	7			×	THE PERSON WITH THE PERSON WATER
wunicipal use	Acces	Accessory Building (specify)	111 \	12		7 30	x 50)	1500
Rec'd for Issuance		Jensey A benning Description of Direct annual	(Specify)	The second secon	- to the sure for the feed of the		2	
ن س	Specia	Special Use: (explain)		industry.		(x)	
	Condi	Conditional Use: (explain)	A COLUMN TO THE	MARKET I	The state of the s	•	×)	
Sccretarial Staff	Other	Other: (explain)				(×	
I (we) declare that this applicat	FAILUF	tE TO OBTAIN A PERMIT or ST.	ARTING CONSTRUCTION W amined by me (us) and to the b	ITHOUT A PERMII	WILL RESULT IN PEN Nedge and belief it is tru	VALTIES e, correct and con	nplete. I (we) ackno	າwledge that I (we)
am (are) responsible for the de may be a result of Bayfield Co above described property at an	tail and accuracy of all i unty relying on this info ly reasonable time fa rth	am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administ above described property at any reasonable time for the purpose of inspection.	ng and that it will be relied upo in or with this application. I (v	on by Bayfield Count ve) consent to count	y in determining wheth y officials charged with	er to issue a perm administering cou	it. I (we) further ac unty ordinances to	issue a permit. I (we) further accept liability which inlistering county ordinances to have access to the
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Address to send permit

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a) starri

Authorized Agent:

(If you are signing on behalf of the

owner(s) a letter RIDGE Rd

tion must accompany this

application)

Date

Owner(s): (If there are Multiple Owners Listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date 10 - 21 -

w

Date of Approval:	/it: ☐ Hold For Fees: ☐	Hold For Affidavit:	Signature of Inspector:
	4.1 V		
Pare of the imprecion.	(If No they need to be attached.)	□Yes □No-	d Condition
Lakes Classification (L/A-)	-	Inspected by:	Date of Inspection: 10.24-15
Zoning District (A ·)	se w small	large greenhou	Inspection Record: PEplacing
□ Yes	nted by Ow perty Surve	ON	Parcel Legalilding Site
	Previously Granted by Variance (B.O.A.) ☐ Yes ②No C		Granted by Variance (B.O.A.) () Yes // No Case#: Y
Affidavit Required □ Yes 为No Affidavit Attached □ Yes 対No	Mitigation Required ☐ Yes ∑ No Mitigation Attachéd ☐ Yes ∑ No	(Deed of Record) X No (Fused/Contiguous Lot(s)) X No X No	□ Yes □ Yes
	%-/3	Permit Date: 10 - 6	Permit # /3-0386
Sanitary Date:	# of bedrooms:	Sanitary Number: Reason for Denial:	Issuance Information (County Use Only) Permit Denied (Date):
has not begun. Iniform Dwelling Code.	NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform The local Town, Village, City, State or Federal agencies may also require permits.	Permits Expire One (1) Year fron One & Two Family Dwelling: <u>ALL</u> ocal Town, Village, City, State or	NOTICE: All Land Use For The Construction Of New The
Tank (HT), Privy (P), and Well (W).	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).	cation(s) of New Construction	(9) Stake or Mark Proposed Lo
the setback must be measured must be visible from et of the proposed site of the structure, or must be	the minimum required setback, the boundary line from whi	a (10) feet but less than thirty (30) feet from orner, or verifiable by the Department by us	Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the sett man the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the previously surveyer at the owner's expense.
nust be visible from one previously surveyed corner to the	e boundary line from which the setback must be measured must be vi	Feet)) feet of the minimum required setback, the at the owner's expense.	Prior to the placement or construction of a structure within ten (10) feet of the minimum required setbac other previously surveyed corner or marked by a licensed surveyor at the owner's expense.
200 Feet	Setback to Well	100 Feet	Setback to Septic Tank or Holding Tank Setback to Drain Field Setback to Drain Field
Feet Feet	Elevation of Floodplain	\$50 Feet	etback from the East Lot Line
Feet	Setback from Wetland		Setback from the South Lot Line Setback from the West Lot Line
ik Feet	Setback from the River, Stream, Creek Setback from the Bank or Bluff	o G	etback from the Established Right-of-Way
Measuremen	Sethack from the Lake Assignment.	180 Feet	Setback from the Centerline of Platted Road
		Measurement	
Changes in plans must be approved by the Planning & Zoning Dept.	Changes in plans must b	e closest point)	(8) Setbacks: (measured to the closest point)
		continuing)	Please complete (1) – (7) above (prior to continuing)
		e attached	Sue
IT) and/or (*) Privy (P)	Pr. (*) Urain Field (UF); (*) Holding Tank (H Creek; or (*) Pond er 20%	(*) Lake; (*) River; (*) Stream/ (*) Wetlands; or (*) Slopes ove	Show any (*): Show any (*):
	(*) Driveway <u>and</u> (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (Wh. (*) Construction (Structure)	(*) Driveway and (*) Frontage All Existing Structures on your (*) Well (\(\lambda\r)\) Soutic Table (*)	(3) Show: (4) Show: (5) Show:
		Proposed Construction	Show / Indicato:

